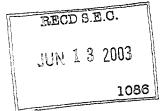
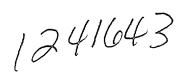
## U. S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



SEC USE ONLY								
Prefix		Serial						
DATE RECEIVED								
			,					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  AVP Ohio Technology I L.P. Private Placement						
Filing Under (Check box(es) that apply): Rule 504 Rule 505X Rule 506X Section 4(6)X ULOE						
Type of Filing: X New Filing Amendment 03021889						
A. BASIC IDENTIFICATION DATA						
1. Enter the information requested about the issuer  Name of Issuer (_ check if this is an amendment and name has changed, and indicate change.)						
AVP Ohio Technology I L.P.						
Address of Executive Offices (Number and Street, City, State, Zip Code)  20 East Circle Drive, Suite 190, Athens, Ohio 45701-3751  Telephone Number (Including Area Code)  (740) 593-9393						
20 East Circle Drive, Suite 190, Athens, Ohio 45701-3751 (740) 593-9393  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)						
Brief Description of Business						
Making, owning and managing investments  Type of Business Organization						
corporation						
business trust limited partnership, to be formed						
Actual or Estimated Date of Incorporation or Organization:  Month Year  Actual Stimated Date of Incorporation or Organization:  Month Year  JUN 1 6 2003						
Jurisdiction of Incorporation or Organization:(Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)  THOMSON						
GENERAL INSTRUCTIONS FINANCIAL						
Federal:						
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).						
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.						
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.						
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.						
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.						
Filing Fee: There is no federal filing fee.						
State:  This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been, made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.  ATTENTION						

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of available state exemption unless such

exemption is predicated on the filing of a federal notice.

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general ar	nd managing pa	rtner of partnership issue	'S.		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	X General and/or Managing Partner
Full Name (Last name first, if indivi AVP Ohio I, Ltd.	dual)				
Business or Residence Address (Numb 20 East Circle Drive, Suite 190					
Check Box(es) that Apply:	Promoter	Beneficial Ówner	X Executive Officer	X Director	General and/or Managing Partner
Full Name (Last name first, if indiving Elderkin, Karl O.	dual)				
Business or Residence Address (f 20 East Circle Drive, Suite 190					
Check Box(es) that Apply:	Promoter _	Beneficial Owner	X Executive Officer	X Director	General and/or Managing Partner
Full Name (Last name first, if indivi Axline, Robert P.	dual)				
Business or Residence Address (1 20 East Circle Drive, Suite 190					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	X Director	General and/or Managing Partner
Full Name (Last name first, if indivi Konneker, Wilfred R.					
Business of Residence Address (1) 20 East Circle Drive, Suite 190	Number and Stree	t. City, State, Zip Code)			and the second s
Check Box(es) that Apply:	Promoter	Beneficial Owner	X Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individed by Jacoby, Aaron D.	dual)				
20 East Circle Drive, Suite 190	, Athens, Ohio	45701			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer:	X Director	General and/or Managing Partner
Full Name (Last name first, if indivi Helou, Francois	dual)				
20 East Circle Drive, Suite 190	, Athens, Ohio	45701			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	X Director	General and/or Managing Partner
Full Name (Last name first, if indivine Scholl, David	dual)				
20 East Circle Drive, Suite 190	, Athens, Ohio	45701			

1. Has the issuer soid, or does the issuer intend to self, to non-accredited investors in this offerting?					В.	INFORM	ATION A	ABOUT	FFERIN	G	and the second			
Answer also in Appendix, Column 2. If filing under ULCS.  2 What is the minimum investment that will be accepted from any individual?  Yes No  No Does the offering permit joint comership of a single unit?  X  4. Enter the information requested for each person who has been or will be paid or givon, directly or indirectly, any commission or similar renumentan for solicillation of purchasers in connection with sales of securities in the offering. It a person to be listed is an essociated person or agent of a sincher or disease registered. All the SEC Sociation with sales are securities in the offering. It a person to be listed is an essociated person or agent of a sincher or disease in essociated person or agent of a sincher or disease in essociated person or agent of a sincher or disease in essociated person or agent of a sincher or disease in essociated person or agent of a sincher or disease in essociated person or agent of a sincher or disease in essociated person or agent of a sincher or disease in essociated person or disease are security or an est of the following of a sincher or disease in essociated person or disease are security or an essociated person or disease are security or disease are security or disease are security or disease are security or disease. Celebrate are security or disease are security or disease are security or disease. Celebrate are security													Yes	No
2 What is the minimum investment that will be accepted from any individual?  Yes No  1. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the effering. If a person to be listed is an associated person or agent of a broker or desert registered with the SEC arrior with a state or states, lite in many of the before on leaker. If nor white IS pursons to be listed as essociated persons of such a broker or deselver, you may set forth the information for that trofue or deselver in one emine is pursons to be listed as associated persons of such a broker or deselver, you may set forth the information for that trofue or deselver only.  Full Name & Last fame field. I individual States is a set of Accountable of the Professor Regency Centre, 28016 Detroit Rd., Ste. 4, Westlake, Ohio 44145  Name of Accountable Blooker or Design  Great Lakes Capital Partners Ltd.  Subsets Yeshiase or Onches (individual States)  All States (Check**/AISTates or Onches (individual States)	1.	Has the issue	er sold, or do	es the issuer	intend to se	II, to non-acc	redited inves	stors in this o	ffering?				·· —	<u>X</u>
The second particles of the offering partial joint ownership of a single unit?					Ans	wer also in A	ppendix, Col	umn 2, if filin	g under ULC	E.				
The state of the offering permit joint ownership of a single unit?														
3. Does the offering permit joint correcting of a single unit?	What is the minimum investment that will be accepted from any individual?													
4. Enter the information requested for each person who has bean or will be paid or given, directly or indirectly, any commission or similar renuluration for solicitation of purchasers in connection with sales of securities in the offenting. If a person to be listed as in associated person or agent of a broker or deler registered with the SEC and/or with the sales or sides, site has name of the broker or dealer. In mine the SEC and/or with the sales or sides, site has name of the broker or dealer. In mine the SEC and/or with the SEC and/or with the information for that broker or dealer only.  Full Nerve Quest ranke (sit. 8 individual)  Business or Residence Address (Number and Street, City, State, 2); Cote)  Regency Centre, 26018 Detroit Rd., Ste. 4, Westlake, Ohio 44145  Warner (Jasoceae Broker or Device or Device or Center (City, State, 2); Cote)  Regency Centre, 26018 Detroit Rd., Ste. 4, Westlake, Ohio 44145  Warner (Jasoceae Broker or Device or Center (City, State, 2); Cote)  Regency Centre, 26018 Detroit Rd., Ste. 4, Westlake, Ohio 44145  Warner (Jasoceae Broker or Device or Device or Center (City, State, 2); Cote)  All States (City, A); Cote, City, Cit													No	
remuneration for solicitation of purchasers in connection with sales of securities in the Offentia, If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, it the name of the torsher or dealer. If more than five (6) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if fidividual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Regency Centre, 26016 Detroit Rd., Ste. 4, Westlake, Ohio 44145  Name of Associated Broker or Dealer  Great Lakes Capital Partners Lute.  Great Lakes Capital Partners Lute.  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IN] [IA] [KS] [KY] [LA] [KE] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [MV] [MN] [NN] [NN] [NN] [NN] [NN] [NN] [MN] [M	3. Does the offering permit joint ownership of a single unit?											<u>X</u>		
Business or Residence Address (Number and Street, City, State, Zp Code)  Regiency Centre, 20016 Detroit Rd., Ste. 4, Westlake, Ohio 44145  Name of Associated Broker or Dealer  Graet Lakes Capital Partners Ltd.  States in Which Person Listee Has Solicited or Intends to Solicit Purchasers (Check *All States or Check individual States)  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [LD]  [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  [MT] [NE] [NV] [NR] [NV] [NR] [NV] [NR] [NV] [VT] [VA] [MA] [MV] [WI] [WY] [PR]  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zp Code)  Name of Associated Broker or Dealer  States in Which Person Listee Has Solicited or Intends to Solicit Purchasers (Check *All States* or check individual States)  [AL] [AK] [AZ] [AR] [CA] (CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [II] [IN] [IN] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  [MT] [NE] [NV] [NH] [NJ] [NM] [NJ] [NM] [NY] [NC] [MA] [WV] [WI] [WY] [PR]  Full Name (Last name first, if individual)  Sustes in Which Person Listee Has Solicited or Intends to Solicit Purchasers (Check *All States* or check individual States)  [AL] [AK] [AZ] [AR] [CA] (CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [Full Name (Last name first, if individual)  Sustes in Which Person Listee Has Solicited or Intends to Solicit Purchasers (Check *All States* or check individual States)  [All States  [AL] [AK] [AZ] [AR] [CA] (CO] [CT] [DE] [DC] [FL] [GA] [HI] [MN] [MS] [MO]  [MT] [NS] [NV] [NS] [NV] [NS] [NV] [NS] [MO] [NV] [NV] [NV] [NV] [NV] [NV] [NV] [NV	4.	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5)												
Regency Centre, 26016 Detroit Rd., Ste. 4, Westlake, Ohio 44145	Full Name (Last	name first, if inc	dividual)											
Regency Centre, 26016 Detroit Rd., Ste. 4, Westlake, Ohio 44145	Business or Bes	iden eo Addrood	(Alumbos and	Stead City St	lata Zin Cada									
States in Which Person Listed Has Solicided or Intends to Solicid Purchasers (Check *All States* or Check individual States)   All States				-										
Great Lakes Capital Partners Ltd.												<del></del>		
Check "All States" or check individual States	Great Lakes	Capital Part	ners Ltd.											
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HT] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [W] [OK] [OR] [PA] [FI] [SC] [SD] [TN] [TX] [UT] [VT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] [FVII Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	States in Which	Person Listed H	las Solicited o	r Intends to So	icit Purchasers	3	<del></del> _	<del></del>						States
[ IL ] [ IN ] [ IA ] [ KS ] [ KY ] [ IA ] [ ME ] [ MD ] [ MA ] [ MI ] [ MN ] [ MS ] [ MO ] [ MT ] [ NE ] [ NV ] [ NH ] [ NJ ] [ NM ] [ NY ] [ NC ] [ ND ] [ OH] [ QX ] [ OK ] [ PA ] [ RI ] [ SC ] [ SD ] [ TN ] [ TX ] [ UT ] [ VT ] [ VA ] [ WA ] [ WV ] [ WI ] [ WY ] [ PR ] [ Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	•													Siales
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check *All States* or check individual States)														
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers   (Check "All States" or check individual States)	Business or Res	sidence Address	(Number and	Street, City, Si	ate, Zip Code	)								
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(Check "All States" or check individual States)	Name of Associ	ated Broker of L	pealer											
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Name of Associated Broker or Dealer   States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								[ ]						<del></del>
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	Business or Res	sidence Address	(Number and	Street, City, St	ate, Zip Code	)								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]			<del> </del>							·				
(Check "All States" or check individual States)	Name of Associ	ated Broker or L	Dealer											
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)  All States													
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	[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount 1. already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \_\_\_ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Type of Security Sold 0 0 Debt..... 0 0 Equity..... \_\_\_ Common \_\_\_ Preferred Convertible Securities (including warrants)..... 0 0 Partnership Interests: (limited partnership interests) \$ 30,000,000 \$ 10,000,000 \_)..... 0 0 Total..... \$ 30,000,000 \$ 10,000,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their Aggregate Dollar Amount of Purchases purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Investors Accredited Investors..... \$ 10,000,000 Non-accredited Investors..... 0 \_\_0 N/A\_ N/A Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part CQuestion 1. Type of Dollar Amount Type of offering Security Sold Rule 505 ..... N/A 0 .... \$\_\_\_ 0 Regulation A..... N/A 0 N/A Rule 504 ..... Total..... N/A Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ..... Printing and Engraving Costs..... \$ 0 \$ 0 Legal Fees..... Accounting Fees..... \$ 0\_\_\_

0

200,000\* 25,000\*

225,000\*

Engineering Fees .....

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify)

Total ......

<sup>\*</sup> Any Other Expenses or Sales Commissions over \$200,000 shall be paid from the funds of the General Partner and not from the proceeds received from the sale of the limited partnership interests.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES AND L	JSE OF	PROCE	EDS				
	b. Enter the difference between the aggregate offering price given in response to Pa Question 1 and total expenses furnished in response to Part C - Question 4.a. This diffies the "adjusted gross proceeds to the issuer."	ference				\$ 9.8	800,000		
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proportion used for each of the purposes shown. If the amount for any purpose is not known, estimate and check the box to the left of the estimate. The total of the payments listed in the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b a	fumish an must equal							
			Payme Offic Direct Affili	ers, ors, &		Payme Oth			
	Salaries and fees		\$	0		\$	0		
	Purchases of real estate		\$	0		\$	0		
	Purchase, rental or leasing and installation of machinery and equipment		\$	0		\$	0		
	Construction or leasing of plant buildings and facilities		\$	0		\$	0		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	0		\$	0		
	Repayment of indebtedness	<u></u>	\$	0		\$	0		
	Working capital		\$	0		\$	0		
	Other (specify): Equity investments and managing expenses		\$	0	<u>X</u>	\$ <u>9,8</u>	00,000		
			\$ \$	0		\$ \$	0		
	Column Totals		\$	0	<u>X</u>	\$ <u>9,8</u>	00,000		
	Total Payments Listed (column totals added)	•••••		<u>X</u> \$ <u>9</u> ,	800,000	<u></u>			
	D. FEDERAL SIGNATUR	E							
ollo	e issuer had duly caused this notice to be signed by the undersigned duly author by signature constitutes an undertaking by the issuer to furnish to the U.S. Sest of its staff, the information furnished by the issuer to any non-accredited investor put	Securities and	Exchang	e Commis	ssion, u	r Rule ipon w	505, the retritten re-		
SSI	uer (Print or Type)	Signature	2//	///	Date				
	P Ohio Technology I L.P.	lola E			105	<u>ع</u> سرد	2003		
Nar	ne of Signer (Print or Type)	-	Title of Signer (Print or Type)						
Karl O. Elderkin			resident, AVP Ohio I, Ltd.						

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).